



APPLICATION FOR PUBLIC DANCE HALL PERMIT

PERMIT OFFICE
201 POPLAR AVENUE, SUITE 1-11
MEMPHIS, TENNESSEE 38103-1973

**-THIS APPLICATION MUST BE FILLED OUT COMPLETELY-
(PLEASE PRINT OR TYPE)**

Today's Date: _____

1. _____
(Applicant's Full Name) (Date of Birth)

(Social Security Number)

(Applicant's Home Address) (Zip) (Home Phone)

2. Dance Hall Name: _____

(Dance Hall Address) (Zip) (Size of Dance Hall Room)

3. List previous employment and occupation for past two (2) years, beginning with most recent:

From - To	Place Of Business	Occupation	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Individuals Only: I certify that I have not been convicted of a felony or misdemeanor involving moral turpitude within the last five (5) years.

(SIGNATURE OF APPLICANT)

4A. List the name of the manager (IF DIFFERENT FROM THE APPLICANT) and the name of the owner, (IF DIFFERENT FROM THE APPLICANT).

(Manager Name)

(Date of Birth)

(Address)

(Phone)

Employees and members of Partnership/Association

Name: _____
Address: _____
DOB: _____ Phone: _____
Position/Status: _____

Name: _____
Address: _____
DOB: _____ Phone: _____
Position/Status: _____

Name: _____
Address: _____
DOB: _____ Phone: _____
Position/Status: _____

Name: _____
Address: _____
DOB: _____ Phone: _____
Position/Status: _____

Name: _____
Address: _____
DOB: _____ Phone: _____
Position/Status: _____

Name: _____
Address: _____
DOB: _____ Phone: _____
Position/Status: _____

Name: _____
Address: _____
DOB: _____ Phone: _____
Position/Status: _____

(Owner Name)

(Date of Birth)

(Address)

(Phone)

5. Partnerships, Firms, Corporations and Associations: Each must prepare, sign and attach a notarized certification required for individuals under item 4.

5A. List the Corporation Officer(s) names and title (E.G. PRESIDENT, VICE-PRESIDENT, ETC.)

****CORPORATIONS ONLY: ATTACH COPY OF CHARTER****

6. Attach a list of full names, addresses, phone numbers and dates of birth of all employees and members of partnership or association. List percentages of stock for all stockholders.

7. Will this establishment feature adult entertainment? If Yes, describe completely and exactly the type of entertainment which will be provided to your customers.

8. Will there be any person(s) in this establishment that accept compensation directly or indirectly for dancing?

_____ YES

_____ NO

9. **APPLICANT:** I hereby certify the above and foregoing information to be true and correct to the best of my knowledge and belief, and further, that I have received a copy and I am aware of the regulations and laws regarding Dance Hall Permits.

**** This form MUST BE NOTARIZED by a notary before your application will be processed. THIS FORM MUST BE SIGNED IN FRONT OF A NOTARY.****

(SIGNATURE OF APPLICANT)

Sworn to and subscribed before me this _____ day of _____, 19____.

(NOTARY PUBLIC)

(COMMISSION STAMP)